Recipient Committee  
Campaign Statement  
Cover Page  
(Government Code Sections 84200-84216.5)

SEE INSTRUCTIONS ON REVERSE

1. Type of Recipient Committee: All Committees – Complete Parts 1, 2, 3, and 4.

☐ Officeholder, Candidate Controlled Committee  
   ☐ State Candidate Election Committee  
   ☐ Recall  
      (Also Complete Part 5)  

☐ Primarily Formed Ballot Measure Committee  
   ☐ Controlled  
   ☐ Sponsored  
      (Also Complete Part 6)  

☐ General Purpose Committee  
   ☐ Sponsored  
   ☐ Small Contributor Committee  
   ☐ Political Party/Central Committee  

☐ Primarily Formed Candidate/Officeholder Committee  
      (Also Complete Part 7)

2. Type of Statement:  

☐ Pre-election Statement  
☐ Semi-annual Statement  
☐ Termination Statement  
      (Also file a Form 410 Termination)  
☐ Amendment (Explain below)

3. Committee Information

I.D. NUMBER  
1325587

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)  
People for Bob Huber-Mayor 2014

STREET ADDRESS (NO P.O. BOX)

CITY STATE ZIP CODE AREA CODE/PHONE

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX

CITY STATE ZIP CODE AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS

4. Verification

I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 10/21/2014

Executed on 10/21/2014

Executed on Date

Executed on Date

Treasurer(s)

NAME OF TREASURER  
Jim King

MAILING ADDRESS

CITY STATE ZIP CODE AREA CODE/PHONE

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

CITY STATE ZIP CODE AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS

FPPC Form 460 (January/05)  
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)  
State of California
5. Officeholder or Candidate Controlled Committee

<table>
<thead>
<tr>
<th>NAME OF OFFICEHOLDER OR CANDIDATE</th>
<th>Robert O. Huber</th>
</tr>
</thead>
<tbody>
<tr>
<td>OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)</td>
<td></td>
</tr>
<tr>
<td>RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)</td>
<td></td>
</tr>
<tr>
<td>CITY</td>
<td></td>
</tr>
<tr>
<td>STATE</td>
<td></td>
</tr>
<tr>
<td>ZIP</td>
<td></td>
</tr>
</tbody>
</table>

Related Committees Not Included in this Statement: List any committees not included in this statement that are controlled by you or are primarily formed to receive contributions or make expenditures on behalf of your candidacy.

<table>
<thead>
<tr>
<th>COMMITTEE NAME</th>
<th>I.D. NUMBER</th>
</tr>
</thead>
<tbody>
<tr>
<td>NAME OF TREASURER</td>
<td>CONTROLLED COMMITTEE?</td>
</tr>
<tr>
<td>YES</td>
<td>NO</td>
</tr>
<tr>
<td>COMMITTEE ADDRESS</td>
<td>STREET ADDRESS (NO P.O. BOX)</td>
</tr>
<tr>
<td>CITY</td>
<td></td>
</tr>
<tr>
<td>STATE</td>
<td></td>
</tr>
<tr>
<td>ZIP CODE</td>
<td></td>
</tr>
<tr>
<td>AREA CODE/PHONE</td>
<td></td>
</tr>
</tbody>
</table>

6. Primarily Formed Ballot Measure Committee

<table>
<thead>
<tr>
<th>NAME OF BALLOT MEASURE</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>BALLOT NO. OR LETTER</td>
<td></td>
</tr>
<tr>
<td>JURISDICTION</td>
<td></td>
</tr>
<tr>
<td>SUPPORT</td>
<td></td>
</tr>
<tr>
<td>OPPOSE</td>
<td></td>
</tr>
</tbody>
</table>

Identify the controlling officeholder, candidate, or state measure proponent, if any.

<table>
<thead>
<tr>
<th>NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>OFFICE SOUGHT OR HELD</td>
<td></td>
</tr>
<tr>
<td>DISTRICT NO. IF ANY</td>
<td></td>
</tr>
</tbody>
</table>

7. Primarily Formed Candidate/Officeholder Committee List names of officeholder(s) or candidate(s) for which this committee is primarily formed.

<table>
<thead>
<tr>
<th>NAME OF OFFICEHOLDER OR CANDIDATE</th>
<th>OFFICE SOUGHT OR HELD</th>
</tr>
</thead>
<tbody>
<tr>
<td>SUPPORT</td>
<td></td>
</tr>
<tr>
<td>OPPOSE</td>
<td></td>
</tr>
<tr>
<td>NAME OF OFFICEHOLDER OR CANDIDATE</td>
<td>OFFICE SOUGHT OR HELD</td>
</tr>
<tr>
<td>SUPPORT</td>
<td></td>
</tr>
<tr>
<td>OPPOSE</td>
<td></td>
</tr>
<tr>
<td>NAME OF OFFICEHOLDER OR CANDIDATE</td>
<td>OFFICE SOUGHT OR HELD</td>
</tr>
<tr>
<td>SUPPORT</td>
<td></td>
</tr>
<tr>
<td>OPPOSE</td>
<td></td>
</tr>
</tbody>
</table>

Attach continuation sheets if necessary
### Contributions Received

<table>
<thead>
<tr>
<th>Description</th>
<th>Column A (TOTAL THIS PERIOD)</th>
<th>Column B (CALENDAR YEAR TOTAL TO DATE)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Monetary Contributions</td>
<td>$2150.00</td>
<td>$38126.00</td>
</tr>
<tr>
<td>2. Loans Received</td>
<td>$0.00</td>
<td>(2010)25000.00</td>
</tr>
<tr>
<td>3. SUBTOTAL CASH CONTRIBUTIONS</td>
<td>$2150.00</td>
<td>$63126.00</td>
</tr>
<tr>
<td>4. Nonmonetary Contributions</td>
<td>$500.00</td>
<td>$3975.40</td>
</tr>
<tr>
<td>5. TOTAL CONTRIBUTIONS RECEIVED</td>
<td>$2650.00</td>
<td>$67101.40</td>
</tr>
</tbody>
</table>

### Expenditures Made

<table>
<thead>
<tr>
<th>Description</th>
<th>Column A (TOTAL THIS PERIOD)</th>
<th>Column B (CALENDAR YEAR TOTAL TO DATE)</th>
</tr>
</thead>
<tbody>
<tr>
<td>6. Payments Made</td>
<td>$7273.08</td>
<td>$14740.98</td>
</tr>
<tr>
<td>7. Loans Made</td>
<td>$0.00</td>
<td>$0.00</td>
</tr>
<tr>
<td>8. SUBTOTAL CASH PAYMENTS</td>
<td>$7273.08</td>
<td>$14740.98</td>
</tr>
<tr>
<td>9. Accrued Expenses (Unpaid Bills)</td>
<td>$0.00</td>
<td>$0.00</td>
</tr>
<tr>
<td>10. Nonmonetary Adjustment</td>
<td>$0.00</td>
<td>$0.00</td>
</tr>
<tr>
<td>11. TOTAL EXPENDITURES MADE</td>
<td>$7273.08</td>
<td>$14740.98</td>
</tr>
</tbody>
</table>

### Current Cash Statement

<table>
<thead>
<tr>
<th>Description</th>
<th>Column A (TOTAL THIS PERIOD)</th>
<th>Column B (TOTAL TO DATE)</th>
</tr>
</thead>
<tbody>
<tr>
<td>12. Beginning Cash Balance</td>
<td>$31524.25</td>
<td>$N/A</td>
</tr>
<tr>
<td>13. Cash Receipts</td>
<td>$2150.00</td>
<td>$N/A</td>
</tr>
<tr>
<td>14. Miscellaneous Increases to Cash</td>
<td>$0.00</td>
<td>$N/A</td>
</tr>
<tr>
<td>15. Cash Payments</td>
<td>$7273.08</td>
<td>$N/A</td>
</tr>
<tr>
<td>16. ENDING CASH BALANCE</td>
<td>$26401.17</td>
<td>$N/A</td>
</tr>
</tbody>
</table>

### Expenditure Limit Summary for State Candidates

<table>
<thead>
<tr>
<th>Description</th>
<th>Column A (TOTAL THIS PERIOD)</th>
<th>Column B (TOTAL TO DATE)</th>
</tr>
</thead>
<tbody>
<tr>
<td>22. Cumulative Expenditures Made*</td>
<td>$N/A</td>
<td>$N/A</td>
</tr>
</tbody>
</table>

*Amounts in this section may be different from amounts reported in Column B.

To calculate Column B, add amounts in Column A to the corresponding amounts from Column B of your last report. Some amounts in Column A may be negative figures that should be subtracted from previous period amounts. If this is the first report being filed for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any).

---

FPPC Form 460 (January/05)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
**Schedule A
Monetary Contributions Received**

**SEE INSTRUCTIONS ON REVERSE**

**NAME OF FILER**
People for Bob Huber-Mayor 2014

**DATE RECEIVED** | **FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR** | **CONTRIBUTOR CODE(s)** | **AMOUNT RECEIVED THIS PERIOD** | **CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)** | **PER ELECTION TO DATE (IF REQUIRED)**
---|---|---|---|---|---
10/8/2014 | Pharmaceutic Litho & Label Co. |   | 1000.00 | 1000.00 | 1000.00
10/9/2014 | Simi Valley GMC |   | 500.00 | 500.00 | 500.00
10/9/2014 | Gold Coast Ecology |   | 100.00 | 100.00 | 100.00
10/14/2014 | Building Industry Assoc. of So. Cal. PAC #741733 |   | 500.00 | 500.00 | 500.00

**SUBTOTAL $ 2100.00**

**Schedule A Summary**

1. Amount received this period – itemized monetary contributions.
   (Include all Schedule A subtotals.) ................................................................. $ 2100.00

2. Amount received this period – unitemized monetary contributions of less than $100 ....................... $ 50.00

3. Total monetary contributions received this period.
   (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ....................... TOTAL $ 2150.00

---

*Contributor Codes

IND – Individual
COM – Recipient Committee
OTH – Other (e.g., business entity)
PTY – Political Party
SCC – Small Contributor Committee

FPPC Form 460 (January/05)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
## Schedule B – Part 1

### Loans Received

Type or print in ink. Amounts may be rounded to whole dollars.

**PUBLICATIONS**

**Schedule B** – **Part 1**

**Loans Received**

SEE INSTRUCTIONS ON REVERSE

**NAME OF FILER**

People for Bob Huber-Mayor 2014

**FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER**

- **IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)**
- **OUTSTANDING BALANCE BEGINNING THIS PERIOD**
- **AMOUNT PAID OR FORGIVEN THIS PERIOD**
- **OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD**
- **INTEREST PAID THIS PERIOD**
- **ORIGNAL AMOUNT OF LOAN**
- **CUMULATIVE CONTRIBUTIONS TO DATE**

<table>
<thead>
<tr>
<th>Lender</th>
<th>Occupation</th>
<th>Beginning Balance</th>
<th>Paid</th>
<th>Forgiven</th>
<th>Remaining Balance</th>
<th>Rate</th>
<th>Original Amount</th>
<th>Cumulative Contributions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Robert Huber</td>
<td>Business Owner, Law Offices of Robert O. Huber</td>
<td>$25,000.00</td>
<td>$0.00</td>
<td>$0.00</td>
<td>None</td>
<td>0%</td>
<td>$25,000</td>
<td>N/A</td>
</tr>
</tbody>
</table>

**Schedule B Summary**

1. Loans received this period ................................................................. $ 0
2. Loans paid or forgiven this period .................................................. $ 0
3. Net change this period (Subtract Line 2 from Line 1.) ....................... NET $ 0

*Amounts forgiven or paid by another party also must be reported on Schedule A.

**TContributor Codes**

- IND – Individual
- COM – Recipient Committee
- OTH – Other (e.g., business entity)
- PTY – Political Party
- SCC – Small Contributor Committee

**Statement covers period from October 1, 2014 through October 18, 2014**

**Page 5 of 7**

**CALIFORNIA FORM 460**

FPFC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
### Schedule C
**Nonmonetary Contributions Received**

**Type or print in ink. Amounts may be rounded to whole dollars.**

**Statement covers period from October 1, 2014 through October 18, 2014**

**NAME OF FILER**
People for Bob Huber-Mayor 2014

**DATE RECEIVED** | **FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR** (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | **CONTRIBUTOR CODE** | **IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)** | **DESCRIPTION OF GOODS OR SERVICES** | **AMOUNT/FAIR MARKET VALUE** | **CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)** | **PER ELECTION TO DATE (IF REQUIRED)** |
--- | --- | --- | --- | --- | --- | --- | --- |
10/10/2014 | Welcome to the Neighborhood | | | One month add in October edition | 500.00 | 500.00 | 500.00 |

**Attach additional information on appropriately labeled continuation sheets.**

**SUBTOTAL $**

**Schedule C Summary**

1. **Amount received this period – itemized nonmonetary contributions.**
   (Include all Schedule C subtotals.) .................................................. $ 500.00

2. **Amount received this period – unitemized nonmonetary contributions of less than $100** ........................................ $

3. **Total nonmonetary contributions received this period.**
   (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.) .................. TOTAL $ 500.00

**Contributor Codes**
- IND - Individual
- COM - Recipient Committee
- OTH - Other (e.g., business entity)
- PTY - Political Party
- SCC - Small Contributor Committee

**FPPC Toll-Free Helpline:** 866/ASK-FPPC (866/275-3772)
**Schedule E**

**Payments Made**

Type or print in ink. Amounts may be rounded to whole dollars.

<table>
<thead>
<tr>
<th>Statement covers period</th>
<th>CALIFORNIA FORM 460</th>
</tr>
</thead>
<tbody>
<tr>
<td>from October 1, 2014</td>
<td></td>
</tr>
<tr>
<td>through October 18, 2014</td>
<td></td>
</tr>
<tr>
<td>Page 7</td>
<td>of 7</td>
</tr>
</tbody>
</table>

**NAME OF FILER**

People for Bob Huber-Mayor 2014

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

- CMP campaign paraphernalia/misc.
- CNS campaign consultants
- CTB contribution (explain nonmonetary)*
- CVC civic donations
- FIL candidate filing/ballot fees
- FND fundraising events
- IND independent expenditure supporting/opposing others (explain)*
- LEG legal defense
- LT campaign literature and mailings
- MBR member communications
- MTG meetings and appearances
- OFC office expenses
- PET petition circulating
- PFA phone bank
- PLO polling and survey research
- POS postage, delivery and messenger services
- PRO professional services (legal, accounting)
- PRT print ads
- RAD radio airtime and production costs
- RFD returned contributions
- SAL campaign workers' salaries
- TEL t.v. or cable airtime and production costs
- TRC candidate travel, lodging, and meals
- TRS staff/spouse travel, lodging, and meals
- TSF transfer between committees of the same candidate/sponsor
- VOT voter registration
- WEB information technology costs (internet, e-mail)

**NAME AND ADDRESS OF PAYEE**

(IF COMMITTEE, ALSO ENTER I.D. NUMBER)

<table>
<thead>
<tr>
<th>CODE OR DESCRIPTION OF PAYMENT</th>
<th>AMOUNT PAID</th>
</tr>
</thead>
<tbody>
<tr>
<td>Postcard mailers and flyers</td>
<td>7273.08</td>
</tr>
</tbody>
</table>

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

**Schedule E Summary**

1. Itemized payments made this period. (Include all Schedule E subtotals.) $ 7273.08
2. Unitemized payments made this period of under $100 $ 0
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).) $ 0
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) $ 7273.08

**FPPC Form 460 (January/05)**
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)